

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK

Joseph Sherrod Cannon

15CV 6105

(In the space above enter the full name(s) of the plaintiff(s).)

-against-

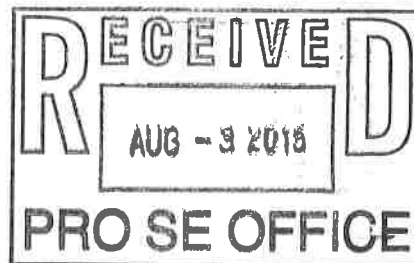
Lowell District Court
John Murphy
Douglas Parisian
Robert Normandin
Mark Hooper
District Attorney of Lowell District Court
District Attorney of Lawrence District Court
Billerica House of Correction
Bridge Water State Hospital
Chelmsford Police Department

(In the space above enter the full name(s) of the defendant(s). If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Part I. Addresses should not be included here.)

COMPLAINT

under the
Civil Rights Act, 42 U.S.C. § 1983
(Prisoner Complaint)

Jury Trial: ☒ Yes ☐ No
(check one)



I. Parties in this complaint:

- A. List your name, identification number, and the name and address of your current place of confinement. Do the same for any additional plaintiffs named. Attach additional sheets of paper as necessary.

Plaintiff Name Joseph Sherrod Cannon
ID # 3491503252
Current Institution George R. Verno Center
Address 09-09 Hazen Street, East Elmhurst, New York
11370

- B. List all defendants' names, positions, places of employment, and the address where each defendant may be served. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.

Defendant No. 1 Name John Murphy Shield # _____
Where Currently Employed Lowell District Court
Address 44 Hurl Street, Lowell MA
01852

Defendant No. 2 Name Attorney Douglas Parigian Shield # _____
Where Currently Employed Lowell District Court
Address 41 Hurd Street, Lowell, MA 01852

Defendant No. 3 Name Attorney Robert Normandin Shield # _____
Where Currently Employed Lowell District Court
Address 41 Hurd Street, Lowell MA 01852

Defendant No. 4 Name District Attorney Shield # _____
Where Currently Employed 2 Appleton District Court
Address 2 Appleton Street, Lawrence MA

Defendant No. 5 Name District Attorney Shield # _____
Where Currently Employed Lowell District Court
Address 41 Hurd Street, Lowell, MA 01852

II. Statement of Claim:

State as briefly as possible the facts of your case. Describe how each of the defendants named in the caption of this complaint is involved in this action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach additional sheets of paper as necessary.

A. In what institution did the events giving rise to your claim(s) occur?
Billerica House of Correction, 269 Treble Cove Road
Billerica, MA

B. Where in the institution did the events giving rise to your claim(s) occur?
D-pool unit

C. What date and approximate time did the events giving rise to your claim(s) occur?
January 9th 2014

D. Facts: I was falsely imprisoned. The papers from the District
Attorneys office says that I was sentenced on January 7th, 2014.
I got sentenced on January 8th 2014. My criminal defense attorney
Robert Normandin had returned from his flight. Never appeared before
adudge on January 7th 2014. On October 10th 2013 I was detained
on a 60 day probation detainer.
On October 10th 2013. John Murphy my probation officer lied to
the Judge and said that I did not report to probation and had
me detained. Did not have me the notice of probation violation. This
was handed to me on April 17th 2014 in the Lawrence District Court
2 Appleton Street, Lawrence, MA by Robert Normandin as he withdrew from the case.
Chelmsford Police Department, Billerica Police Department
Judge Archia, Attorney Mark Hooper, Attorney Douglas
Parisian, Attorney Robert Normandin, Lowell District
Court District Attorney, Lawrence District Court District
Attorney
Bridget McGaricle, Savannah Joyner, Nicole Legeere
Douglas Parisian

III. Injuries:

If you sustained injuries related to the events alleged above, describe them and state what medical treatment, if any, you required and received. mental distress, pain and suffering, cruel
and unusual punishment inflicted

IV. Exhaustion of Administrative Remedies:

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted." Administrative remedies are also known as grievance procedures.

A. Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?

Yes ☒ No ☐

If YES, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s).

Billerica House of Correction, 269 Treble Cove
Road Billerica MA

B. Does the jail, prison or other correctional facility where your claim(s) arose have a grievance procedure?

Yes ☒ No ☐ Do Not Know ☐

C. Does the grievance procedure at the jail, prison or other correctional facility where your claim(s) arose cover some or all of your claim(s)?

Yes ☐ No ☐ Do Not Know ☒

If YES, which claim(s)? _____

D. Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose?

Yes ☐ No ☒

If NO, did you file a grievance about the events described in this complaint at any other jail, prison, or other correctional facility?

Yes ☐ No ☒

E. If you did file a grievance, about the events described in this complaint, where did you file the grievance?

1. Which claim(s) in this complaint did you grieve? _____

2. What was the result, if any? _____

3. What steps, if any, did you take to appeal that decision? Describe all efforts to appeal to the highest level of the grievance process. _____

F. If you did not file a grievance:

1. If there are any reasons why you did not file a grievance, state them here: did
not know at the time and was not in the right state
of mind to understand that I was falsely imprisoned

2. If you did not file a grievance but informed any officials of your claim, state who you informed,

when and how, and their response, if any: _____

- G. Please set forth any additional information that is relevant to the exhaustion of your administrative remedies. I've contacted Prisoners Legal Services 16 Winthrop Square
3rd Floor Boston MA 02110

Note: You may attach as exhibits to this complaint any documents related to the exhaustion of your administrative remedies.

V. Relief:

State what you want the Court to do for you (including the amount of monetary compensation, if any, that you are seeking and the basis for such amount). I am demanding \$9 million dollars for
nominal damages \$1,800,000, pain and suffering \$1,800,000,
mental distress \$1,800,000, cruel and unusual punishment \$1,800,000
compensatory damages \$1,800,000 and for VIOLATION of my
constitutional and civil rights

VI. Previous lawsuits:

On
these
claims

- A. Have you filed other lawsuits in state or federal court dealing with the same facts involved in this action?
 Yes _____ No ✓

- B. If your answer to A is YES, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another sheet of paper, using the same format.)

1. Parties to the previous lawsuit:

Plaintiff _____

Defendants _____

2. Court (if federal court, name the district; if state court, name the county) _____

3. Docket or Index number _____

4. Name of Judge assigned to your case _____

5. Approximate date of filing lawsuit _____

6. Is the case still pending? Yes ____ No ____

If NO, give the approximate date of disposition _____

7. What was the result of the case? (For example: Was the case dismissed? Was there judgment in your favor? Was the case appealed?) _____

On
other
claims

- C. Have you filed other lawsuits in state or federal court otherwise relating to your imprisonment?

Yes ☒ No ____

- D. If your answer to C is YES, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, using the same format.)

1. Parties to the previous lawsuit:

Plaintiff Joseph Sherard Cannon

Defendants New York City Police Department

2. Court (if federal court, name the district; if state court, name the county) United States District Court Southern District

3. Docket or Index number 15-CV-4579

4. Name of Judge assigned to your case Loretta A. Preska

5. Approximate date of filing lawsuit May 29th, 2015

6. Is the case still pending? Yes ☒ No ____

If NO, give the approximate date of disposition _____

7. What was the result of the case? (For example: Was the case dismissed? Was there judgment in your favor? Was the case appealed?) _____

I declare under penalty of perjury that the foregoing is true and correct.

Signed this 16th day of July, 2015.

Signature of Plaintiff

Inmate Number

Institution Address

3491508252

George R. Verno Center

09-09 Hazen Street

East Elmhurst, New York

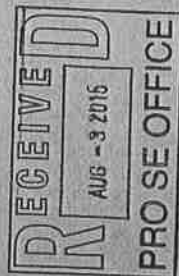
11370

Note: All plaintiffs named in the caption of the complaint must date and sign the complaint and provide their inmate numbers and addresses.

I declare under penalty of perjury that on this 17th day of July, 2015 I am delivering this complaint to prison authorities to be mailed to the *Pro Se* Office of the United States District Court for the Southern District of New York.

Signature of Plaintiff:

George R. Vercillo Center, P.O. Box 100
09-09 Hazen Street
East Elmhurst, New York 11370



LEGAL MAIL



United States District Court
Southern District of New York
Daniel Patrick Moynihan United States Courthouse
500 Pearl Street, Room 230
New York, New York 10007

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